U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U 10685	2. Fiscal Year Covered From:	
y	1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Russell M Bargmann, Jr	Name International Longshore and Warehouse Union	
	Labor Organization File Number 000-202	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 1188 Franklin Street, 4th Floor	Street 1188 Franklin Street, 4th Floor	
City San Francisco	City San Francisco	
State California ZIP Code + 4 94109	State California ZIP Code + 4 94109	
5. Position in labor organization.  Research Director		
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	7.b. Amount.	
City		
State ZIP Code + 4		
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
	- 0/15/2005	

Date

Telephone Number

Name of Person Filing Russell Bargmann, Jr		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
Name and address of Business (including trade name, if any).	9. Business deals with:			
Name				
Trade Name, if any:	a. Labor Organiza	tion		
P.O. Box, Bldg., Room No., if any	c. Employer			
Street				
City				
State ZIP Code + 4				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.		
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	11.b. Approximate dollar valu	ue of such dealing.		
City	12.a. Nature of interest hel	Walliaman		
State ZIP Code + 4				
	12.b. Amount.			
C. Received from any employer (other than an employer covered under parts A and B above)				
or from any labor relations consultant to an employer any payment of money	or other thing of value.  14.a. Nature of payment.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	4/13/2004 Cash aw	vard (\$100) 2004 Hotel accommodations to		
Name Union Privilege	attend Liaison Co	onference (\$511)		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Suite 300				
Street 1125 15th Street, NW				
City Washington				
State District of Columbia ZIP Code + 4 20005				
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.	\$611		

## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name Riviera Resort Hotel	9/25/2004 Fruit basket (\$30) 2/1/2004 Cheese and salami tray (\$57)		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 1600 N. Indian Canyon Drive			
City Palm Springs			
State California ZIP Code + 4 92262-4602	14.b. Amount of payment.		
13.b. Is the Business an Employer or Consultant?	\$87		
C. Received from any employer (other than an employer covered under parts A apayment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name Bradford & Marzec	12/2004 2 bottles of wine (\$44 est.)		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Suite 4050			
Street 333 South Hope Street			
City Los Angeles  State California ZIP Code + 4 90071			
Siddle Contact Louisian and the contact and th	14.b. Amount of payment.		
13.b. Is the Business an Employer X or Consultant ?	\$44		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any			
payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
School and the second s	14.b. Amount of payment.		
13.b. Is the Business an Employer or Consultant?			

## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.		
trade name, if any).	November 2004 Dinner (\$80.00 est.)		
Name American Realtor Investors			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Suite 300			
Street 1800 Valley View Lane			
City Dallas			
State Texas ZIP Code + 4 75234	Michael Commission (Commission Commission Commission Commission Commission Commission Commission Commission Co		
Total provide the control of the con	14.b. Amount of payment.		
13.b. Is the Business an Employer or Consultant?			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any			
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trade name, if any).			
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		
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13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.		
trade name, if any).			
Name (			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

August 15, 2005



US Department of Labor Employment Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW, Room N-5616 Washington DC 20210

Dear Sir,

Enclosed please find my LM-30 for calendar year 2004. I have tried my best to remember all of my contacts with the referenced entities that may fall within the LM-30 disclosure requirements during the 2004 calendar year. Given the passage of time, it is possible, if not likely, that I have not remembered every event or all of the relevant details of every event. All of my contacts with the referenced entities were routine and appropriate and occurred in the context of the ordinary course of my affairs on behalf of the Union.

Sincererly,

Russ Bargmann